

BUSINESS SIGN APPLICATION

PERMIT NUMBER: SGN _____ — _____						DROP OFF # _____																			
A. ADDRESS: _____						G. SETBACKS: SGN 1 <table><tr><td>REQUIRED</td><td></td><td>PROPOSED</td></tr><tr><td>_____</td><td>FRONT</td><td>_____</td></tr><tr><td>_____</td><td>FRONT/REAR</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td colspan="3">LOCATION/DETAILS: _____</td></tr></table>		REQUIRED		PROPOSED	_____	FRONT	_____	_____	FRONT/REAR	_____	_____	SIDE	_____	_____	SIDE	_____	LOCATION/DETAILS: _____		
REQUIRED		PROPOSED																							
_____	FRONT	_____																							
_____	FRONT/REAR	_____																							
_____	SIDE	_____																							
_____	SIDE	_____																							
LOCATION/DETAILS: _____																									
BUSINESS NAME: _____																									
B. OWNER OF THE PROPERTY:																									
NAME: _____																									
ADDRESS: _____																									
CITY _____ STATE _____ ZIP CODE _____																									
TELEPHONE NUMBER: (_____) _____ — _____																									
EMAIL ADDRESS _____																									
Under penalty of perjury, I attest that this sign will be erected and maintained in accordance with the statements made on this document and plans filed with application for permit, Zoning Ordinances of Marion County, and the Building Code of the Consolidated City.																									
_____ Property Owner's Signature						_____ Date																			
C. EXISTING ZONING: _____						H. SETBACKS: SGN 2 <table><tr><td>REQUIRED</td><td></td><td>PROPOSED</td></tr><tr><td>_____</td><td>FRONT</td><td>_____</td></tr><tr><td>_____</td><td>FRONT/REAR</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td colspan="3">LOCATION/DETAILS: _____</td></tr></table>		REQUIRED		PROPOSED	_____	FRONT	_____	_____	FRONT/REAR	_____	_____	SIDE	_____	_____	SIDE	_____	LOCATION/DETAILS: _____		
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_____	SIDE	_____																							
_____	SIDE	_____																							
LOCATION/DETAILS: _____																									
D. PETITION NUMBER: _____																									
COMMITMENTS: _____ YES _____ NO																									
PRIOR PERMITS: _____																									
INTEGRATED CENTER: _____ YES _____ NO																									
NAME OF CENTER: _____																									
E. DETAILS:						I. SETBACKS: SGN 3 <table><tr><td>REQUIRED</td><td></td><td>PROPOSED</td></tr><tr><td>_____</td><td>FRONT</td><td>_____</td></tr><tr><td>_____</td><td>FRONT/REAR</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td colspan="3">LOCATION/DETAILS: _____</td></tr></table>		REQUIRED		PROPOSED	_____	FRONT	_____	_____	FRONT/REAR	_____	_____	SIDE	_____	_____	SIDE	_____	LOCATION/DETAILS: _____		
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LOCATION/DETAILS: _____																									
SGN 1																									
SGN 2																									
SGN 3																									
SGN 4																									
SGN 5																									
STREET FRNT: _____																									
ILLUMIN TYPE: _____																									
FAÇADE WIDTH: _____																									
FAÇADE HEIGHT: _____																									
FAÇADE AREA: _____																									
SIGN TYPE: _____																									
BOTTOM EDGE: _____																									
TOP EDGE: _____																									
FACE HEIGHT: _____																									
FACE WIDTH: _____																									
AREA PER FACE: _____																									
AREA ALLOWED: _____																									
AREA EXIST: _____																									
AREA AVLBLE: _____																									
# OF FACES: _____																									
EST VALUE: _____																									
F. EVMS DETAILS:						J. SETBACKS: SGN 4 <table><tr><td>REQUIRED</td><td></td><td>PROPOSED</td></tr><tr><td>_____</td><td>FRONT</td><td>_____</td></tr><tr><td>_____</td><td>FRONT/REAR</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td colspan="3">LOCATION/DETAILS: _____</td></tr></table>		REQUIRED		PROPOSED	_____	FRONT	_____	_____	FRONT/REAR	_____	_____	SIDE	_____	_____	SIDE	_____	LOCATION/DETAILS: _____		
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LOCATION/DETAILS: _____																									
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SGN 2																									
SGN 3																									
SGN 4																									
SGN 5																									
SIGN AREA: _____																									
EVMS ALLOWED: _____																									
EVMS PROPOSED: _____																									
PROT DISTRICT WITHIN 600' YES/NO _____																									
SGNLZD INTR SCTN WITHIN 125' YES/NO _____																									
L. APPLICANT/CONTRACTOR:						K. SETBACKS: SGN 5 <table><tr><td>REQUIRED</td><td></td><td>PROPOSED</td></tr><tr><td>_____</td><td>FRONT</td><td>_____</td></tr><tr><td>_____</td><td>FRONT/REAR</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td>_____</td><td>SIDE</td><td>_____</td></tr><tr><td colspan="3">LOCATION/DETAILS: _____</td></tr></table>		REQUIRED		PROPOSED	_____	FRONT	_____	_____	FRONT/REAR	_____	_____	SIDE	_____	_____	SIDE	_____	LOCATION/DETAILS: _____		
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_____	FRONT/REAR	_____																							
_____	SIDE	_____																							
_____	SIDE	_____																							
LOCATION/DETAILS: _____																									
BUSINESS NAME: _____																									
YOUR NAME (PRINT): _____																									
Under penalty of perjury, I attest the information contained on the form is complete and accurate. Application fee is non-refundable and due upon submittal regardless of permit issuance.																									
_____ Applicant/Contractor's Signature						_____ Date																			
_____ Business Listing Number						_____ Individual Listing Number																			
BUSINESS ADDRESS: _____																									
CITY _____ STATE _____ ZIP _____																									
EMAIL ADDRESS: _____																									
TELEPHONE NUMBER: (_____) _____ — _____																									